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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or DocId Number

10/791245

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.10(a))		
TOTAL CLAIMS (37 CFR 1.10(c))	minus 20 *	
INDEPENDENT CLAIMS (37 CFR 1.10(d))	minus 3 *	
MULTIPLE DEPENDENT CLAIMS PRESENT (37 CFR 1.10(i))		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	FEE
	\$ 1,000.00
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	\$ 1,000.00
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))	22	22	1
Independent (37 CFR 1.10(d))	3	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(i))			

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))	15	22	1
Independent (37 CFR 1.10(d))	3	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(i))			

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))			
Independent (37 CFR 1.10(d))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(i))			

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
X \$ _____	
TOTAL ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This document is a form prescribed by 37 CFR 1.10. The information is required to obtain or retain a benefit by the patent which is to be paid by the USPTO to the applicant or owner. If information is provided by 37 CFR 1.10 and 37 CFR 1.11. This collection is estimated to take 12 minutes to complete. It includes gathering, preparing, and submitting the completed application to the USPTO. Time will vary depending upon the individual case. Any comments on the present form are required to complete this form and suggest a way for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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